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JUN -7 2021 U.S. DISTRICT COURT U.S. DISTRICT OF MO EASTERN OISTRICT OF MO EASTERN OISTRICT OF MO

UNITED STATES DISTRICT COURT EASTERN DISTRICT OF MISSOURI DIVISION

)
) Case No
) (to be assigned by Clerk of District Court)
) JURY TRIAL DEMANDED
YES NO
)
)

EMPLOYMENT DISCRIMINATION COMPLAINT

This employment discrimination lawsuit is based on (check only those that apply):

Title VII of the Civil Rights Act of 1964, as amended, 42 U.S.C. §§ 2000e, et seq., for employment discrimination on the basis of race, color, religion, gender, or national origin. NOTE: In order to bring suit in federal district court under Title VII, you must first obtain a right-to-sue letter from the Equal Employment Opportunity Commission.

Age Discrimination in Employment Act of 1967, as amended, 29 U.S.C. §§ 621, et seq., for employment discrimination on the basis of age (age 40 or older).

NOTE: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file charges with the Equal Employment Opportunity Commission.

Americans with Disabilities Act of 1990, as amended, 42 U.S.C. §§ 12101, et seq., for employment discrimination on the basis of disability.

NOTE: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a right-to-sue letter from the Equal Employment Opportunity Commission.

Rehabilitation Act of 1973, as amended, 29 U.S.C. §§ 701, et seq., for employment discrimination on the basis of a disability by an employer which constitutes a program or activity receiving federal financial assistance.

NOTE: In order to bring suit in federal district court under the Rehabilitation Act of 1973, you must first file charges with the appropriate Equal Employment Office representative or agency.

Other (Describe)

PARTIES

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2.	Plaintiff's name: Keyin Jones
	Plaintiff's address: 3086 Wellington DC Street address or P.O. Box
	City/ County/ State/Zip Code
	St. Louis Mo (3033 / 314 - 707 - 3484) Area code and telephone number
3.	Defendant's name: USIC
	Defendant's address: 13607 Lakefront DC Street address or P.O. Box
	Earth City Mc 63045 City/County/State/Zip Code
	314 - 878 - 4718 Area code and telephone number

NOTE: IF THERE ARE ADDITIONAL PLAINTIFFS OR DEFENDANTS, PLEASE PROVIDE THEIR NAMES, ADDRESSES AND TELEPHONE NUMBERS ON A SEPARATE SHEET OF PAPER.

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eet Addr	ess) (City/County) (State) (Zip Code)
5.	When did the discrimination occur? Please give the date or time period:
	Dec, 15 2020
	ADMINISTRATIVE PROCEDURES
6.	Did you file a charge of discrimination against the defendant(s) with the Missour
imission	on Human Rights?
	Yes Date filed:
X	_No
7.	Did you file a charge of discrimination against the defendant(s) with the Equal
loyment	Opportunity Commission or other federal agency?
V	Yes Date filed:
	No
8.	Have you received a Notice of Right-to-Sue Letter?
0.	
	Tennal Te
s, please	attach a copy of the letter to this complaint.
9.	If you are claiming age discrimination, check one of the following:
	60 days or more have passed since I filed my charge of age discrimination with the
ıl Emplo	yment Opportunity Commission.
	fewer than 60 days have passed since I filed my charge of age discrimination with the
ıl Emplo	yment Opportunity Commission.
	3

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NATURE OF THE CASE

10.	The conduct complained of in this lawsuit involves (check only those that apply):
	failure to hire me
	✓ termination of my employment
	failure to promote me
	failure to accommodate my disability
	terms and conditions of my employment differ from those of similar employees
	vertaliation
	harassment
	other conduct (specify):
Did	you complain about this same conduct in your charge of discrimination?
	Yes No

11. I bel	ieve that I was discriminated against because of my (check all that apply):
\checkmark	race
	religion
✓	national origin
	color
_	gender
	disability
	age (birth year is:)
	other: Retalition
Did you stat	te the same reason(s) in your charge of discrimination?
V	Yes No
Describe specifically s involved in the co	e here, as briefly and clearly as possible, the essential facts of your claim. y the conduct that you believe is discriminatory and describe how each defendant nduct. Take time to organize your statement; you may use numbered paragraphs l. It is not necessary to make legal arguments, or to cite cases or statutes.
	a Complaint against My emptyer Do to The fact apony has went against my self morals of Religion morals
The con	namy has went agaist my self morals of Religion morals
tooleyee	It Obsastons Time after Time I Tried Talking with my To Try To come To A Unstanding The company Hus Devicen
All My P	wants As US Citizen & work Wight's as well
I Belive	with me ont all my complaint load to Hacesment multir Drug tes
A	and water and course of any foliar Para Pali in addition

(Continue to page 6, if additional space is needed.)

13.	The acts set forth in paragraph 12 of this complaint:
	are still being committed by the defendant.
	are no longer being committed by the defendant.
	may still be being committed by the defendant.

REQUEST FOR RELIEF

State briefly and exactly what you want the Court to do for you. Make no legal arguments;

cite no cases or statutes. I would like the court to immediate the matter / situation
Get me my Job Back As soon as possible with

Back pay from The Time live missed at work.

14. Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule

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I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this

day of

20 2

Signature of Plaintiff